

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of:
Nedaa Abdul-Ghani Nasif

Serial No.: 09/944,564

Filed: September 4, 2001

Group Art Unit: 1623

Examiner: Patrick T. Lewis

Our Ref.: 278455.100

**ASTHMA/ALLERGY THERAPY
THAT TARGETS T-LYMPHOCYTES
AND/OR EOSINOPHILS**

TRANSMITTAL LETTER

August 12, 2009

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Sir:

Please find enclosed: a Transmittal Form (1 pg.); a Fee Transmittal for Issue Fee (original + 1 copy); a Return Receipt Postcard; and an Express Mail Certification (1 pg.) in respect to the application of Nedaa Abdul-Ghani Nasif.

Please send all correspondence in connection with this application to Meyer, Unkovic & Scott LLP, 535 Smithfield Street, Suite 1300, Pittsburgh, PA 15222.

Please be authorized to charge any fees and or credit any overpayments to deposit account 50-3325. The below-signed individual is an authorized user of said account.

Respectfully submitted,


Debra Z. Anderson
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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 09/944,564

Filing Date September 4, 2001

First Named Inventor Nedaa Abdul-Ghani Nasif

Art Unit 1623

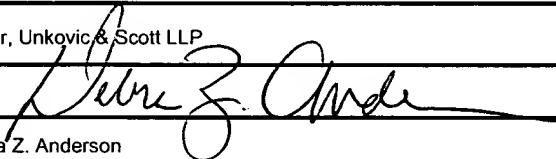
Examiner Name Patrick T. Lewis

Attorney Docket Number 278455.100

ENCLOSURES (Check all that apply)

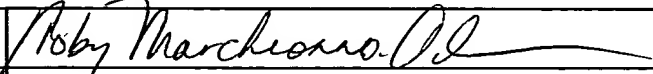
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Meyer, Unkovic & Scott LLP		
Signature			
Printed name	Debra Z. Anderson		
Date	August 12, 2009	Reg. No.	44,506

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name	Toby Marchionno-Adams	Date	August 12, 2009

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